

CV-10 1690

CIVIL RIGHTS COMPLAINT  
42 U.S.C. § 1983

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

Martin Donaldson-----x

Martin Donaldson,  
Full name of plaintiff/prisoner ID#

FILED  
IN CLERK'S OFFICE  
U.S. DISTRICT COURT E.D.N.Y.

★ APR 15 2010 ★

LONG ISLAND OFFICE

Plaintiff,

JURY TRIAL DEMAND

YES / NO       

-against-

NASSAU County  
Police Department  
3rd Precinct Willington Park N.Y.

Enter full names of defendants

[Make sure those listed above are  
identical to those listed in Part III.]

SEYBERT, J.  
LINDSAY, M.

Martin Donaldson Defendants.-----x

I. Previous Lawsuits:

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes ( ) No ( ☒ )
- B. If your answer to A is yes, describe each lawsuit in the space below (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit:

Plaintiffs: \_\_\_\_\_  
\_\_\_\_\_

Defendants: \_\_\_\_\_  
\_\_\_\_\_

2. Court (if federal court, name the district;  
if state court, name the county)

\_\_\_\_\_

3. Docket Number: 2010 NA003344

4. Name of the Judge to whom case was assigned: Richard E. Fiocher

5. Disposition: (for example: Was the case dismissed? Was it appealed? Is it still pending?)  
\_\_\_\_\_

6. Approximate date of filing lawsuit: 3-30-10

7. Approximate date of disposition: \_\_\_\_\_

II. Place of Present Confinement: NASSAU County Corrections

A. Is there a prisoner grievance procedure in this institution? Yes ( ) No (✓)

B. Did you present the facts relating to your complaint in the prisoner grievance procedure? Yes ( ) No (✓)

C. If your answer is YES,

1. What steps did you take? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What was the result? \_\_\_\_\_  
\_\_\_\_\_

D. If your answer is NO, explain why not It did not  
happen in this jail

E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? Yes ( ) No (✓)

F. If your answer is YES,

1. What steps did you take? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What was the result? \_\_\_\_\_  
\_\_\_\_\_

III. Parties:

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff MARTIN DONALDSON

Address 20-F GLADYS AVE. HEMPSTEAD N.Y. 11550

(In item B below, place the full name and address of each defendant)

B. List all defendants' names and the addresses at which each defendant may be served. Plaintiff must provide the address for each defendant named.

Defendant No. 1

Det John CEFALU shield # 1145  
NASSAU County Police Department  
3<sup>th</sup> PRECENT Willingston Park N.Y

Defendant No. 2

Det John DOE  
NASSAU County Police Department  
3<sup>th</sup> PRECENT Willingston Park N.Y

Defendant No. 3

Det John DOE  
NASSAU County Police Department  
3<sup>th</sup> PRECENT Willingston Park N.Y

Defendant No. 4

Det John DOE  
NASSAU County Police Department  
3<sup>th</sup> PRECENT Willingston Park N.Y

Defendant No. 5

Det John DOE  
NASSAU County Police Department  
3<sup>th</sup> PRECENT Willingston Park N.Y

[Make sure that the defendants listed above are identical to those listed in the caption on page 1].

## IV. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)

TWO WARRANTS HAD BEEN ISSUED FOR MY ARREST ON 28 OCT 09 AND 4 NOV 09. ON 25-10 AT AROUND 8:10AM THE NADDAU COUNTY POLICE BOXED THE CAR IN AT THE BACK OF THE GLADYS AVE APARTMENT COMPLEX. WHILE I WAS SETTING IN THE DRIVERS SIDE SEAT MY WIFE GOT OUT OF THE PASSENGER SIDE <sup>SEAT</sup> WARE AT THAT TIME A NADDAU COUNTY POLICE OFFICER ASK MY WIFE FOR HER NAME AND I.D. SHE GAVE THE OFFICER HER DRIVERS LICENSE. AT THAT TIME THE POLICE OFFICER RAN HER LICENSE AND IT CAME BACK CLEAN. THEN THE OFFICER PUT HANDCUFFS ON HER AND PAT SEARCHED HER. I WAS DIGGING IN HER ~~WITH~~ POCKETS WITH <sup>AT</sup> THE PRESENCE OF A FEMALE OFFICER ON SITE

IV. A If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

## STATEMENT OF CLAIM

At that time I got out of the car and closed the door only to be approach by Det John Cefalu. Det John Cefalu ask for my name and I told him. At that time Det John Cefalu; his partner handcuffed me. After handcuffing me John Cefalu partner; another officer decide to search the car with out problecause where thay found A glass crack pipe residue; A green plastic bag with crack residue ~~which~~ which was under the drivers seat and was not in "Clear site" of the Police officers. Then at that time Det John Cefalu; his partner searched me; found two metal pieces of wire with residue in my pockets. I was then put in to the police car and taken to jail charged with 220.3 CRIMINAL POSSESSION OF A CONTROLLED SUBSTANCE in the seventh degree A CLASS A MISDEMEANOR

V. Relief:

State what relief you are seeking if you prevail on your complaint.

Monetary Damages \$ 3,000,000  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury that on 4-2-10, I delivered this  
(Date)  
complaint to prison authorities to be mailed to the United States District Court for the Eastern  
District of New York.

Signed this 30 day of March, 2010. I declare under penalty of  
perjury that the foregoing is true and correct.

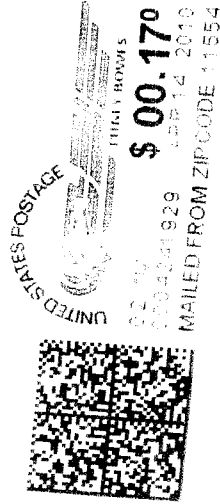
X   
Signature of Plaintiff

\_\_\_\_\_  
Name of Prison Facility

NASSAU COUNTY CORRECTIONS CENTER  
100 CARMAN AVENUE,  
EAST MEADOWS N.Y. 11554  
Address

\_\_\_\_\_  
Prisoner ID# 10001164

Mr. David  
C. # 10001164  
Location EIG 40  
100 CARMAN AVENUE  
EAST MEADOW, NEW YORK 11554-1146



Clerk U.S. District Court, EDNY  
Post office Box 9014  
Central Islip, New York 11722-9014

\* LEGAL MAIL \*

\* LEGAL MAIL \*

1172239014

